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#4

PTO/SB/01 (03-01)

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration  
Submitted OR  
with Initial  
Filing

☒ Declaration  
Submitted after Initial  
Filing (surcharge)  
(37 CFR 1.16 (e))  
required)

**Attorney Docket Number**

**STAN-132CIP**

**First Named Inventor**

**STEVENS, WALTER J.**

**COMPLETE IF KNOWN**

**Application**

**10/010,960**

**Filing Date**

**November 9, 2001**

**Group Art Unit**

**3731**

**Examiner Name**

**Unassigned**

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**ANASTOMOSIS SYSTEM AND METHODS FOR USE**

(Title of the Invention)

the specification of which

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OR

☒ was filed on **11/09/01** as United States Application **10/010,960**.

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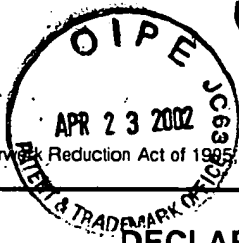
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[Page 1 of 2]

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City **Menlo Park**

State **California**

ZIP **94025**

Country **U.S.A**

Telephone **(650) 327-3400**

Fax **(650) 327-3231**

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NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) **WALTER J.**

Family Name  
Or Surname **STEVENS**

Inventor's  
Signature

*Walter Stevens*

Date **2/12/2002**

Residence: City **MOUNTAIN VIEW**  
*Woodbury*

State **MINNESOTA**  
*CALIFORNIA*

Country **USA**

Citizenship **USA**

Mailing Address **225 PAMELA DRIVE, APT. 227**

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City **MOUNTAIN VIEW**

*Woodbury*

State **MINNESOTA**  
*CALIFORNIA*

ZIP **94040**  
*94025*

Country **USA**

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
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Family Name  
Or Surname **CHEN**

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Signature

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Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
JESSICA		SMITH	
Inventor's Signature		Date	
Residence: City Granite Bay	State California	Country USA	Citizenship USA
Mailing Address 4827 Bentwood Way			
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MARY K.		O'CONNELL	
Inventor's Signature		Date	
Residence: City Palo Alto	State California	Country USA	Citizenship USA
Mailing Address 477 Margarita Avenue			
City Palo Alto	State California	ZIP 94306	Country USA

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	<b>COMPLETE IF KNOWN</b>	
	<b>Application</b>	<b>10/010,960</b>
	<b>Filing Date</b>	<b>November 9, 2001</b>
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Family Name  
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Inventor's  
Signature

Date

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Citizenship **USA**

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NAME OF SECOND INVENTOR:

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**Application** 10/010,960  
**Filing Date** November 9, 2001  
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**Examiner Name** Unassigned

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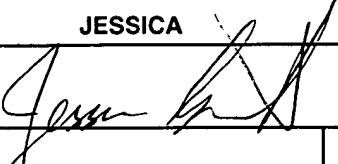


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Family Name  
Or Surname **STEVENS**

Inventor's  
Signature

Date

Residence: City **MOUNTAIN VIEW**

State  
**CALIFORNIA**

Country **USA**

Citizenship **USA**

Mailing Address **225 PAMELA DRIVE, APT. 227**

City **MOUNTAIN VIEW**

State  
**CALIFORNIA**

ZIP **94040**

Country **USA**

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) **EUNICE**

Family Name  
Or Surname **CHEN**

Inventor's  
Signature

Date

Residence: City **MENLO PARK**

State  
**CALIFORNIA**

Country **USA**

Citizenship **USA**

Mailing Address **812 CAMBRIDGE AVENUE**

City **MENLO PARK**

State  
**CALIFORNIA**

ZIP **94025**

Country **USA**

☒ Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02S attached hereto





Please type (+) inside this box →



PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 4	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
JESSICA		SMITH	
Inventor's Signature		Date	
Residence: City Granite Bay		State California	Country USA
Mailing Address 4827 Bentwood Way		Citizenship USA	
City Granite Bay		State California	ZIP 95746
Country USA			
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
DOUGLAS		OGUSS	
Inventor's Signature <i>Douglas Oguss</i>		Date 02-02-2002	
Residence: City Northbrook		State Illinois	Country USA
Mailing Address 2126 Valley Road		Citizenship USA	
City Northbrook		State Illinois	ZIP 60062
Country USA			
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
MARY K.		O'CONNELL	
Inventor's Signature		Date	
Residence: City Palo Alto		State California	Country USA
Mailing Address 477 Margarita Avenue		Citizenship USA	
City Palo Alto		State California	ZIP 94306
Country USA			

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PTO/SB/01 (03-01)

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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration  
Submitted with Initial  
Filing OR  
☒ Declaration  
Submitted after Initial  
Filing (surcharge)  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number	STAN-132CIP
First Named Inventor	STEVENS, WALTER J.
COMPLETE IF KNOWN	
Application	10/010,960
Filing Date	November 9, 2001
Group Art Unit	3731
Examiner Name	Unassigned

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**ANASTOMOSIS SYSTEM AND METHODS FOR USE**

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on **11/09/01** as United States Application **10/010,960**.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by and amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02/B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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**DECLARATION – Utility or Design Patent Application**

☒ As a named inventor I hereby appoint Practitioners at Customer Number **24353** as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Direct all correspondence to: ☒ Customer Number **24353** OR ☐ Correspondence address below  
Or Bar Code Label

**Name** **Bozicevic, Field & Francis LLP**

**Address** **200 Middlefield Road, Suite 200**

**City** **Menlo Park**

**State** **California**

**ZIP** **94025**

**Country** **U.S.A**

**Telephone** **(650) 327-3400**

**Fax** **(650) 327-3231**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**NAME OF SOLE OR FIRST INVENTOR:**

☐ A petition has been filed for this unsigned inventor

**Given Name**  
(first and middle [if any]) **WALTER J.**

**Family Name**  
Or Surname **STEVENS**

**Inventor's**  
**Signature**

**Date**

**Residence: City** **MOUNTAIN VIEW**

**State**  
**CALIFORNIA**

**Country** **USA**

**Citizenship** **USA**

**Mailing Address** **225 PAMELA DRIVE, APT. 227**

**City** **MOUNTAIN VIEW**

**State**  
**CALIFORNIA**

**ZIP** **94040**

**Country** **USA**

**NAME OF SECOND INVENTOR:**

☐ A petition has been filed for this unsigned inventor

**Given Name**  
(first and middle [if any]) **EUNICE**

**Family Name**  
Or Surname **CHEN**

**Inventor's**  
**Signature**

**Date**

**Residence: City** **MENLO PARK**

**State**  
**CALIFORNIA**

**Country** **USA**

**Citizenship** **USA**

**Mailing Address** **812 CAMBRIDGE AVENUE**

**City** **MENLO PARK**

**State**  
**CALIFORNIA**

**ZIP** **94025**

**Country** **USA**

☐ Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02S attached hereto

Please type a plus sign (+) inside this box →

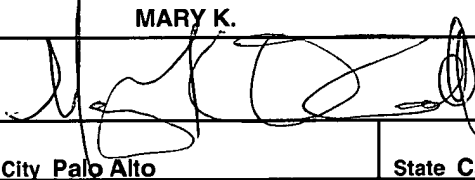


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Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 4	
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
JESSICA		SMITH	
Inventor's Signature		Date	
Residence: City Granite Bay	State California	Country USA	Citizenship USA
Mailing Address 4827 Bentwood Way			
City Granite Bay	State California	ZIP 95746	Country USA
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DOUGLAS		OGUSS	
Inventor's Signature		Date	
Residence: City Northbrook	State Illinois	Country USA	Citizenship USA
Mailing Address 2126 Valley Road			
City Northbrook	State Illinois	ZIP 60062	Country USA
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
MARY K.		O'CONNELL	
Inventor's Signature 		Date 2/8/02	
Residence: City Palo Alto	State California	Country USA	Citizenship USA
Mailing Address 477 Margarita Avenue			
City Palo Alto	State California	ZIP 94306	Country USA

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PTO/SB/01 (03-01)

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration  
Submitted with Initial  
Filing

☒ Declaration  
Submitted after Initial  
Filing (surcharge)  
(37 CFR 1.16 (e))  
required)

**Attorney Docket Number**

**STAN-132CIP**

**First Named Inventor**

**STEVENS, WALTER J.**

**COMPLETE IF KNOWN**

**Application**

**10/010,960**

**Filing Date**

**November 9, 2001**

**Group Art Unit**

**3731**

**Examiner Name**

**Unassigned**

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**ANASTOMOSIS SYSTEM AND METHODS FOR USE**

*(Title of the Invention)*

the specification of which

☐ is attached hereto

OR

☒ was filed on **11/09/01** as United States Application **10/010,960**.

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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[Page 1 of 2]

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Direct all correspondence to: ☒ Customer Number **24353** OR ☐ Correspondence address below  
Or Bar Code Label

Name **Bozicevic, Field & Francis LLP**

Address **200 Middlefield Road, Suite 200**

City **Menlo Park**

State **California**

ZIP **94025**

Country **U.S.A**

Telephone **(650) 327-3400**

Fax **(650) 327-3231**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) **WALTER J.**

Family Name  
Or Surname **STEVENS**

Inventor's  
Signature

Date

Residence: City **MOUNTAIN VIEW**

State  
**CALIFORNIA**

Country **USA**

Citizenship **USA**

Mailing Address **225 PAMELA DRIVE, APT. 227**

City **MOUNTAIN VIEW**

State  
**CALIFORNIA**

ZIP **94040**

Country **USA**

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) **EUNICE**

Family Name  
Or Surname **CHEN**

Inventor's  
Signature

Date

Residence: City **MENLO PARK**

State  
**CALIFORNIA**

Country **USA**

Citizenship **USA**

Mailing Address **812 CAMBRIDGE AVENUE**

City **MENLO PARK**

State  
**CALIFORNIA**

ZIP **94025**

Country **USA**

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PTO/SB/02A (11-00)

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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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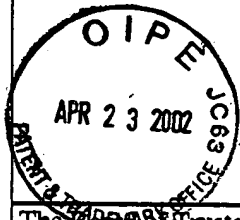
DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 4	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
JESSICA		SMITH	
Inventor's Signature		Date	
Residence: City Granite Bay	State California	Country USA	Citizenship USA
Mailing Address 4827 Bentwood Way			
City Granite Bay	State California	ZIP 95746	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
DOUGLAS		OGUSS	
Inventor's Signature		Date	
Residence: City Northbrook	State Illinois	Country USA	Citizenship USA
Mailing Address 2126 Valley Road			
City Northbrook	State Illinois	ZIP 60062	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
MARY K.		O'CONNELL	
Inventor's Signature		Date	
Residence: City Palo Alto	State California	Country USA	Citizenship USA
Mailing Address 477 Margarita Avenue			
City Palo Alto	State California	ZIP 94306	Country USA

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**POWER OF ATTORNEY  
BY ASSIGNEE**



Attorney Docket	STAN-132CIP
First Named Inventor	Stevens et al
Application Number	10/010,960
Filing Date	November 9, 2001
Examiner Name (Group Art Unit)	Unassigned (3731
Confirmation No.	5625
Title: ANASTOMOSIS SYSTEM AND METHODS FOR USE	

The Board of Trustees of the Leland Stanford Junior University, assignee of the above-identified application by assignment dated 02/12/02, 02/16/02, 02/05/02, 02/02/02, 02/08/02, and 02/18/02, hereby appoints:

**BOZICEVIC, FIELD & FRANCIS LLP**

Name	Registration No.	Name	Registration No.
Karl Bozicevic	28,807	Pamela J. Sherwood	36,677
Bret E. Field	37,620	Frank Becking	42,309
Carol L. Francis	36,513	Paula A. Borden	42,344
Alan W. Cannon	34,977	Robert C. Hall	39,209
Kathleen S. Hall	44,143	David D. Phinney	48,364
Carol M. LaSalle	39,740		

as its attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

**DIRECT ALL CORRESPONDENCE TO:**

Individual Name	Bret E. Field		
Firm Name	BOZICEVIC, FIELD & FRANCIS LLP		
Address	200 Middlefield Road, Suite 200		
City, State, Zip	Menlo Park, California 94025		
Country	U.S.A.		
Telephone	(650) 327-3400	Facsimile	(650) 327-3231

**SIGNATURE of Assignee of Record**

In accordance with 37 CFR §3.73(b) I hereby certify that I am empowered to act on behalf of the Assignee of the above-identified patent application. The original Assignment is concurrently being forwarded to the Assignment Branch of the U.S. Patent Office for recordation.

I declare that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code §1001 and that such willful false statements may jeopardize the validity of the above referenced application or any patent resulting from that application.

Name and Company	Kathy Ku, Stanford University	OTL
Title	Director	
Signature	Katharine Ku	Date
		3-11-02